

This listing of claims will replace all prior versions, and listings, of claims in the application:

**LISTING OF CLAIMS**

1. (Currently Amended) A method of selling healthcare services to a patient, the method comprising:

establishing a plurality of contracting healthcare service providers;

providing, via a patient terminal, a case statement template having a basic information section for specifying an identifier of the case statement, contact information of the patient, and health information of the patient and a clinical information section for specifying a category of a procedure, a specific procedure, a complaint of the patient, and past medical history of the patient ~~having one or more areas in which to specify healthcare needs of the patient and requirements for services associated with the healthcare needs of the patient, the healthcare needs of the patient including a description of a complaint of the patient and the requirements including a date for a procedure requested by the patient~~;

transmitting case statement information specified in the case statement template over a network, at least a portion of the case statement information provided by the patient;

preparing a case statement based on the case statement information;

delivering the case statement to at least one contracting healthcare service provider; and

receiving a response from the at least one contracting healthcare service provider, the response including a price, a clinical track record, and service information.

2. (Original) A method as claimed in claim 1, wherein the response includes information concerning one or more clinical quality indicators for one healthcare service provider.

3. (Original) A method as claimed in claim 2, wherein the one or more clinical quality indicators includes the mortality rate for a medical procedure.

4. (Original) A method as claimed in claim 2, wherein the one or more clinical quality indicators includes the number of times a medical procedure has been performed.

5. (Original) A method as claimed in claim 2, wherein the one or more clinical quality indicators includes the number of times a medical procedure has been performed by a physician associated with one of the one or more contracting healthcare service providers.
6. (Previously Presented) A method as claimed in claim 1, further comprising reviewing the response from the at least one healthcare service provider.
7. (Previously Presented) A method as claimed in claim 6, wherein reviewing the response from the at least one healthcare service provider includes reviewing the response with a referring physician.
8. (Previously Presented) A method as claimed in claim 1, wherein the response includes information concerning the total cost of a medical procedure.
9. (Original) A method as claimed in claim 1, further comprising securing the services of a responding healthcare service provider by sending a deposit to the responding healthcare service provider.
10. (Original) A method as claimed in claim 1, further comprising securing the services of a responding healthcare service provider by sending a deposit to a marketplace operator and sending a remaining amount to the responding healthcare service provider.
11. (Original) A method as claimed in claim 1, wherein preparing a case statement from case statement information includes filtering unique identifying information.
12. (Original) A method as claimed in claim 1, further comprising scheduling an outpatient visit with the patient and a staff member of the at least one contracting healthcare service provider.
13. (Original) A method as claimed in claim 1, wherein the price is a not-to-exceed amount.
14. (Previously Presented) A method as claimed in claim 13, wherein the price includes charges of a facility of the at least one contracting healthcare service provider and charges of principal professionals performing the healthcare services.

15. (Currently Amended) A system of selling healthcare services, the system comprising:

a database of contracting healthcare service providers;

a healthcare case statement information submission mechanism for providing configured to provide a case statement template having a basic information section for specifying unique identifying information for uniquely identifying the patient, the case statement template further having a clinical information section for specifying a category of a procedure, a specific procedure, a complaint of the patient, and past medical history of the patient, the healthcare case statement information submission mechanism for including areas for a patient's clinical and non-clinical requirements and to transmit transmitting case statement information over a network, the case statement information including the unique identifying information for use able to uniquely identifying the patient;

a case statement engine for generating configured to generate de-identified case statements based on the case statement information, the de-identified case statements excluding the unique identifying information;

a healthcare case statement distribution engine for delivering to delivering de-identified case statements to healthcare service providers;

a proposal construction engine including clinical quality indicator areas; and

a response-receiving engine for receiving to receive responses from healthcare service providers and to delivering the responses to the patient.

16. (Original) A system as claimed in claim 15, further comprising a database of patients.

17. (Previously Presented) A system as claimed in claim 15, wherein the response-receiving engine checks responses for clinical quality indicators.

18. (Original) A system as claimed in claim 17, wherein the clinical quality indicators include the mortality rate for a medical procedure.

19. (Original) A system as claimed in claim 17, wherein the clinical quality indicators include the number of times a medical procedure has been performed.
20. (Original) A system as claimed in claim 17, wherein the clinical quality indicators include the number of times a medical procedure has been performed by a physician associated with one particular response.
21. (Original) A system as claimed in claim 15, further comprising a referring physician template.
22. (Original) A system as claimed in claim 15, further comprising a contact mechanism including a number of input mechanisms to construct a message.
23. (Original) A system as claimed in claim 15, wherein the proposal construction engine checks responses for a price of healthcare services listed therein.
24. (Original) A system as claimed in claim 15, further comprising a billing module.
25. (Original) A system as claimed in claim 15, further comprising at least one patient terminal coupled to the healthcare case statement distribution engine.
26. (Original) A system as claimed in claim 15, further comprising at least one service provider terminal coupled to the healthcare case statement distribution engine.
27. (Original) A system as claimed in claim 15, wherein the healthcare case statement submission mechanism; the healthcare case statement distribution engine; the proposal construction engine; and the response-receiving engine are located on a server.

28. (Currently Amended) A method of selling healthcare services to a patient, the method comprising:

establishing a plurality of contracting healthcare service providers;

providing a case statement template having a basic information section for specifying an identifier of the patient and health insurance information of the patient and a clinical information section for specifying a category of a procedure, a specific procedure, a complaint of the patient, and past medical history of the patient ~~one or more areas in which to specify clinical and non-clinical requirements of the patient~~;

transmitting case statement information, at least a portion of which is provided by the patient, from the case statement template over a network;

preparing a case statement based on the case statement information;

establishing ~~case statement~~ profile criteria for each of the plurality of contracting healthcare service providers, the ~~case statement~~ profile criteria ~~limiting~~ configured to limit case statements to be made available to a contracting healthcare service provider based on at least one of a medical area associated with the clinical requirements of the patient, a distance between a patient location and a service location associated with the contracting healthcare service provider, and an insurance carried by the patient;

making the case statement available to each contracting healthcare service provider whose profile criteria matches the case statement; and

receiving a response to the case statement from at least one contracting healthcare service provider, the response including a price, a clinical track record, and non-clinical information.

29. (Original) A method as claimed in claim 28, wherein the response includes information concerning one or more clinical quality indicators for one healthcare service provider.

30. (Original) A method as claimed in claim 29, wherein the one or more clinical quality indicators includes the mortality rate for a medical procedure.

31. (Original) A method as claimed in claim 29, wherein the one or more clinical quality indicators includes the number of times a medical procedure has been performed.
32. (Original) A method as claimed in claim 29, wherein the one or more clinical quality indicators includes the number of times a medical procedure has been performed by a physician associated with one of the one or more contracting healthcare service providers.
33. (Previously Presented) A method as claimed in claim 28, further comprising reviewing the response from the at least one healthcare service provider.
34. (Previously Presented) A method as claimed in claim 33, wherein reviewing the response from the at least one healthcare service provider includes reviewing the response with a referring physician.

35. (Currently Amended) A method of selling healthcare services to a patient, the method comprising:

establishing a plurality of contracting healthcare service providers;

providing, via a patient terminal, a case statement template having a basic information section for specifying an identifier of the patient, a referring physician section for specifying a name of a referring physician of the patient, and a clinical information section for specifying a category of a procedure, a specific procedure, a complaint of the patient, and past medical history of the patient~~having one or more areas in which to specify clinical and non-clinical requirements of the patient~~;

~~providing a referring physician template having one or more areas in which to specify information concerning the patient's referring physician;~~

transmitting case statement information specified in the case statement template ~~and the referring physician template~~ over a network;

preparing a case statement based on the case statement information;

transmitting the case statement to at least one contracting healthcare service provider; and

receiving a response from the at least one contracting healthcare service provider, the response including a price, a clinical track record, and service information.

36. (New) A method of obtaining healthcare services, the method comprising:

entering, via a terminal, case statement information into a case statement template, the case statement template having a basic information section for specifying an identifier of the case statement, contact information of the patient, and health information of the patient and a clinical information section for specifying a category of a procedure, a specific procedure, a compliant of the patient, and past medical history of the patient;

transmitting the case statement information over a network; and

receiving a response from at least one healthcare service provider, the response including a price, a clinical track record, and service information.

37. (New) A method of obtaining information about at least one healthcare service provider, the method comprising:

entering, via a terminal, case statement information into a case statement template, the case statement template having a basic information section for specifying characteristics of an individual and health insurance information of the individual and a clinical information section for specifying a category of a procedure and past medical history of the individual;

transmitting the case statement information over a network; and

receiving information about at least one healthcare service provider, the information including a clinical track record and service information.

38. (New) The method of claim 37, wherein receiving information about at least one healthcare service includes receiving information about a facility associated with the at least one healthcare service provider.

39. (New) The method of claim 37, wherein receiving information about at least one healthcare service includes receiving information about at least one price associated with a procedure performed by the at least one healthcare service provider.